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| | Γ. | | January 12, 2010 | | | (Date) | | | | |
| APPLICATION NO. FILING DATE | | | FIRST NAMED INVE | | | NTOR ATTORNEY DOCKET NO. | | | CONFIRMATION NO. | |
| L | 03/08/2007 | | Robin D. Clar | | | | | | 4531 | |
| 10/596,998 03/08/2007 Kobin D. Clark TITLE OF INVENTION: AZADECALIN GLUCOCORTICOID RECEPTOR MODULATORS | | | | | | | | | | |
| HILLE OF INVENTION: AZADECABIN GLOCOCONNOCID IDEA. TORNOCID IDEA. | | | | | | | | | | |
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| APPLN, TYPE | SMALL ENTITY | 15 | SUE FEE DUE | PUBLICATION FEE I | ŲE | PREV. PAID (SSU) | E FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | YES | | \$755 | \$300 | | \$0 | | \$1055 | 01/19/2010 | |
| EXAMINER | | | ART UNIT CLASS-SUB | | 3 |] | | | | |
| DAVIS, ZINNA NORTHINGTON 1625 | | | | 514-309000 | | | | | | |
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| Critisos). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | | | | or agents OR, alternatively, and Crew LLP | | | | | | |
| registered attorney or agent) and the names of up to | | | | | | | | | | |
| PTO/SB/47; Rev 03- Number is required | 2 registered patent attorneys or agents. If no name is 3 | | | | | | | | | |
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| 3. ASSIGNED NAME AND RESIDENCE of the property of the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. | | | | | | | | | | |
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| Corcept Therapeutics, Inc. Menlo Park, California USA | | | | | | | | | | |
| Please check the appropriate assignee category or categories (will not be printed on the patent): | | | | | | | | | | |
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| Authorized Signature / Alexander R. Trimble / Datelanuary 12, 2010 | | | | | | | | y 12, 2010 | | |
| Typed or printed name Alexander R. Trimble | | | | Registration No. 52,301 | | | | | | |
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